



New Jersey Department of Environmental Protection
Site Remediation Program

COVER/CERTIFICATION FORM

(Submit with Remedial Phase Report, Receptor Evaluation, and CEA Forms)

Date Stamp
(For Department use only)

SECTION A. SITE INFORMATION

Site Name: Amerada Hess Corp (AOC-1: North Landfarm)

AKAs: Hess Corporation - Former Port Reading Complex (AOC-1: North Landfarm)

Street Address: 750 Cliff Road

Municipality: Woodbridge Township (Township, Borough or City)

County: Middlesex Zip Code: 07064

Program Interest (PI) Number(s): 006148

Case Tracking Number(s) for this submission: E20130449

Date Remediation Initiated Pursuant to N.J.A.C. 7:26C-2: 10/09/2013

State Plane Coordinates for a central location at the site: Easting: 563792.42 Northing: 629847.25

List current Municipal Block and Lot Numbers of the Site:

Block # <u>760.02</u>	Lot #(s) <u>1, 2, 3</u>	Block # <u>1095.01</u>	Lots #(s) <u>6</u>
Block # <u>756</u>	Lot #(s) <u>3</u>	Block # <u>664.01</u>	Lots #(s) <u>1.01, 1.02</u>
Block # <u>756.01</u>	Lot #(s) <u>2</u>	Block # <u>760</u>	Lot #(s) <u>6</u>
Block # <u>757</u>	Lot #(s) <u>1</u>	Block # <u>760.01</u>	Lot #(s) <u>2,3</u>
		Block # <u>756.01</u>	Lot #(s) <u>1.02,3</u>
		Block # <u>756.02</u>	Lot #(s) <u>1,8</u>

SECTION B. SUBMISSION STATUS

1. Indicate how the Electronic Data Deliverable (EDD) for this submission is being provided to the NJDEP:

- ☐ Via Email at srpedd@dep.state.nj.us (attach NJDEP confirmation email); or
☐ CD (attach to this submission)
☒ Not Applicable – No EDD

2. Complete the following Submission and Permit Status Table:

Remedial Phase Documents	N/A	Included in this Submission	Previously Submitted	Date of Submission	Date of Revised Submission	Date of Previous NJDEP Approval	Date of Document Withdrawal
Preliminary Assessment Report	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	10/09/2015			
Site Investigation Report	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	11/09/2015			
Remedial Investigation Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Remedial Action Work Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Remedial Action Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Response Action Outcome	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Other Submissions							
Alternative Soil Remediation Standard and/or Screening level Application Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Case Inventory Document		<input checked="" type="checkbox"/>					
Classification Exception Area / Well Restriction Area (CEA/WRA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Discharge to Ground Water Permit by Rule Authorization Request	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			02/15/1985	

IEC Engineered System Response Action Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Immediate Environmental Concern Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
LNAPL Interim Remedial Measure Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Public Notification	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	10/09/2015			
Receptor Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	11/06/2015			
Technical Impracticability Determination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Vapor Concern Mitigation Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Permit Application – list:	<input checked="" type="checkbox"/>						
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				
Radionuclide Remedial Action Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Radionuclide Remedial Action Workplan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Radionuclide Remedial Investigation Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Radionuclide Remedial Investigation Workplan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

SECTION C. SITE USE

Current Site Use: (check all that apply)

- ☒ Industrial ☐ Agricultural
☐ Residential ☐ Park or recreational use
☐ Commercial ☐ Vacant
☐ School or child care ☐ Government
☐ Other: _____

Intended Future Site Use, if known: (check all that apply)

- ☒ Industrial ☐ Park or recreational use
☐ Residential ☐ Vacant
☐ Commercial ☐ Government
☐ School or child care ☐ Future site use unknown
☐ Other: _____

SECTION D. CASE TYPE: (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Administrative Consent Order (ACO) | <input type="checkbox"/> Landfill (SRP subject only) |
| <input type="checkbox"/> Brownfield Development Area (BDA) | <input type="checkbox"/> Regulated Underground Storage Tank (UST) |
| <input type="checkbox"/> Child Care Facility | <input type="checkbox"/> Remediation Agreement (RA)/Remediation Certification |
| <input type="checkbox"/> Chrome Site (Chromate chemical production waste) | <input type="checkbox"/> School Development Authority (SDA) |
| <input type="checkbox"/> Coal Gas | <input type="checkbox"/> School facility |
| <input type="checkbox"/> Due Diligence with RAO | <input type="checkbox"/> Spill Act Defense – Government Entity |
| <input type="checkbox"/> Hazardous Discharge Remediation Fund (HDSRF) Grant/Loan | <input type="checkbox"/> Spill Act Discharge |
| <input checked="" type="checkbox"/> ISRA | <input type="checkbox"/> UST Grant/Loan |
| | <input type="checkbox"/> Other: _____ |

Federal Case (check all that apply)

- ☒ RCRA GPRA 2020 ☐ CERCLA/NPL ☐ USDOD ☐ USDOE

1. Is the party conducting remediation a government entity? ☐ Yes ☒ No

If "Yes," check one: ☐ Federal ☐ State ☐ Municipal ☐ County

SECTION E. PUBLIC FUNDS

Did the remediation utilize public funds? ☐ Yes ☒ No

If "Yes," check applicable:

- | | | |
|--------------------------------------|--|---|
| <input type="checkbox"/> UST Grant | <input type="checkbox"/> UST Loan | <input type="checkbox"/> Brownfield Reimbursement Program |
| <input type="checkbox"/> HDSRF Grant | <input type="checkbox"/> HDSRF Loan | <input type="checkbox"/> Landfill Reimbursement Program |
| <input type="checkbox"/> Spill Fund | <input type="checkbox"/> Schools Development Authority | <input type="checkbox"/> Environmental Infrastructure Trust |

SECTION F. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATIONFull Legal Name of the Person Responsible for Conducting the Remediation: Hess CorporationRepresentative First Name: JohnRepresentative Last Name: SchenkewitzTitle: Manager, RemediationPhone Number: (609) 406-3969

Ext: _____

Fax: (732) 352-7795Mailing Address: Trenton-Mercer Airport 601 Jack Stephan WayCity/Town: West TrentonState: New JerseyZip Code: 08628Email Address: jschenkewitz@hess.com

This certification shall be signed by the person responsible for conducting the remediation who is submitting this notification in accordance with Administrative Requirements for the Remediation of Contaminated Sites rule at N.J.A.C. 7:26C-1.5(a).

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, including all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, to the best of my knowledge, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties.

Signature: _____

Date: 9/23/16Name/Title: John Schenkewitz/Remediation Manager**For CEA Submissions:**

☐ Check this box if the person above is also the property owner of the site or their representative. If this person is not the site property owner, please ensure the site property owner's name and address is in the first line of the table in Section E.2 of the Classification Exception Area / Well Restriction Area (CEA/WRA) Fact Sheet Form.

SECTION G. LICENSED SITE REMEDIATION PROFESSIONAL INFORMATION AND STATEMENTLSRP ID Number: 576297First Name: JohnLast Name: VirgiePhone Number: (732) 739-6444

Ext: _____

Fax: _____

Mailing Address: 1625 Highway 71City/Town: BelmarState: New JerseyZip Code: 07719Email Address: jvirgie@earthsys.net

This statement shall be signed by the LSRP who is submitting this notification in accordance with N.J.S.A. 58:10C-14, and N.J.S.A. 58:10B-1.3b(1) and (2).

I certify that I am a Licensed Site Remediation Professional authorized pursuant to N.J.S.A. 58:10C to conduct business in New Jersey. As the Licensed Site Remediation Professional of record for this remediation, I:

[SELECT ONE OR BOTH OF THE FOLLOWING AS APPLICABLE]:☐ *directly oversaw and supervised all of the referenced remediation, and/or*☒ *personally reviewed and accepted all of the referenced remediation presented herein.*

I believe that the information contained herein, and including all attached documents, is true, accurate and complete.

It is my independent professional judgment and opinion that the remediation conducted at this site, as reflected in this submission to the Department, conforms to, and is consistent with, the remediation requirements in N.J.S.A. 58:10C-14.

My conduct and decisions in this matter were made upon the exercise of reasonable care and diligence, and by applying the knowledge and skill ordinarily exercised by licensed site remediation professionals practicing in good standing, in accordance with N.J.S.A. 58:10C-16, in the State of New Jersey at the time I performed these professional services.

I am aware pursuant to N.J.S.A. 58:10C-17 that for purposely, knowingly or recklessly submitting false statement, representation or certification in any document or information submitted to the board or Department, etc., that there are significant civil, administrative and criminal penalties, including license revocation or suspension, fines and being punished by imprisonment for conviction of a crime of the third degree.

LSRP Signature: Date: 9/23/16LSRP Name/Title: John Virgie, Sr. Client ManagerCompany Name: Earth Systems, Inc.

Completed forms should be sent to:

Bureau of Case Assignment & Initial Notice
Site Remediation Program
NJ Department of Environmental Protection
401-05H
PO Box 420
Trenton, NJ 08625-0420



New Jersey Department of Environmental Protection
Site Remediation Program

REMEDIATION ACTION WORKPLAN FORM

Date Stamp
(For Department use only)

SECTION A. SITE

Site Name: Amerada Hess Corp (AOC-1: North Landfarm)

Program Interest (PI) Number(s): 006148

Case Tracking Number(s) for this submission: E20130449

This form must be attached to the Cover/Certification Form

SECTION B. ALTERNATIVE FILL / PBR REQUEST

1. Is this submission a proposal to obtain NJDEP pre-approval for using alternative fill in excess of the volume required for a remedial action? ☐ Yes ☒ No

If "Yes," has notification been provided to:

- ☐ Each owner of real property and the tenants of those properties, located within 200 feet of the site boundary;
☐ The mayor of each municipality which the site is located;
☐ The county designated solid waste coordinator(s);
☐ The municipal clerk of each municipality in which the site is located; and
☐ The county health department(s) and local health agency(ies).

2. Is a Discharge to Ground Water Permit by Rule Authorization Request required? ☐ Yes ☒ No

If "Yes," indicate below if the permit application is attached to this submission or was previously submitted.

- ☐ Permit Application is attached to this submission
☐ Permit Application submitted to the NJDEP on this date: _____

SECTION C. SCOPE OF REMEDIATION ACTION WORKPLAN

1. Does the RAW address:

- ☒ Area(s) of Concern (AOCs) Only
☐ Entire Site (Based on a completed and submitted Preliminary Assessment/Site Investigation)

2. Total number of contaminated AOCs associated with the case: 1

3. Total number of contaminated AOCs addressed in this submission: 1

When answering the remaining questions on this form consider only the AOCs addressed in this submission.

SECTION D. GENERAL

1. Is an unrestricted use or a presumptive remedy required? ☐ Yes ☒ No

If "Yes," is an unrestricted use or a presumptive remedy being proposed? ☐ Yes ☐ No

2. Is the proposed remedial action an alternative remedy pursuant to N.J.A.C. 7:26E-5.3? ☐ Yes ☒ No

If "Yes," specify the section/page(s) of the RAW where the alternative remedy is proposed:

3. Has/will the remediation vary from the Technical Rules? ☐ Yes ☒ No

If "Yes," provide the citation(s) from which the remediation has/will vary and the page(s) in the attached document where the rationale for the variance is provided.

N.J.A.C. 7:26E- _____ Page _____

N.J.A.C. 7:26E- _____ Page _____

N.J.A.C. 7:26E- _____ Page _____

4. Will the proposed remedial action render the property unusable for future redevelopment or for recreational use (N.J.A.C. 7:26C-6.4(b))? ☒ Yes ☐ No

SECTION E. SITE CONDITIONS

1. Is any radiological contamination currently present at the AOCs addressed in this submission? ☐ Yes ☒ No
2. At any time, did any of the AOCs addressed in this submission contain Ordnance and Explosives/ Unexploded Ordnance (OE/UXO)? ☐ Yes ☒ No
3. Does the proposed remedial action involve containment of free product? ☐ Yes ☒ No
4. Have any of the following contaminants ever been detected in sediment above the ecological screening levels at the AOCs addressed in this submission? ☐ Yes ☒ No

If "yes," check all that apply:

☐ Arsenic ☐ Dioxin ☐ Mercury ☐ PCBs ☐ Pesticides

5. Are any of the following conditions currently present for the AOCs addressed in this submission: (check all that apply)

Ground water:

- ☒ Contaminated ground water in the overburden aquifer
- ☐ Contaminated ground water in a confined aquifer
- ☐ Contaminated ground water in the bedrock aquifer
- ☐ Contaminated ground water in multiple aquifer units
- ☐ Multiple distinct ground water plumes
- ☐ Contaminated ground water migrating off-site
- ☐ Natural background ground water contamination
- ☐ Contaminated ground water discharging to surface water or Environmentally Sensitive Natural Resource (ESNR)
- ☐ Residual or free product
- ☐ Radionuclides

Soil:

- ☐ On-site discharge(s) impacting soil off-site
- ☐ Chromate Chemical Production Waste/COPR
- ☐ Munitions and explosives of concern
- ☒ Contaminated soil in the saturated zone
- ☐ Historic pesticide impacts to soil
- ☐ Residual or free product
- ☐ Radionuclides
- ☒ Historic Fill
- ☐ Natural background only above Impact to Ground Water Cleanup Criteria
- ☐ Natural background above Direct Contact Remediation Standards
- ☐ Soil contamination in an ESNR

SECTION F. ALTERNATIVE AND CLEAN FILL USE

1. Will alternative fill be used? ☐ Yes ☒ No
2. Will clean fill be used? ☒ Yes ☐ No
3. Will material be sent off-site for use as alternative and/or clean fill at a Site Remediation Program (SRP) site? ☐ Yes ☒ No

If "Yes," specify the section/page in the RAW where it states the SRP site receiving this alternative and/or clean fill: _____

4. Will material be sent off-site for use as alternative and/or clean fill at a non-SRP site? ☐ Yes ☒ No

If "Yes," specify the section/page in the RAW where it states the non-SRP site receiving this alternative and/or clean fill: _____

5. Specify the section/pages where the Fill Use Plan pursuant to N.J.A.C. 7:26E-5.2(g) can be found: Section 6.2, pages 17-21

SECTION G. REMEDIAL ACTION WORKPLAN INFORMATION

Permit Information

1. Does the site contain any land use features (e.g. wetlands, flood hazard area, etc.) that have been or will be impacted by remedial activities? ☒ Yes ☐ No
2. Are land use permits required prior to the implementation of the remedial action? ☐ Yes ☒ No

If "Yes," specify the section/page(s) in the RAW where land use permits are discussed: _____

3. Are any federal, state, or local permits, permit modifications, or certifications, other than those listed in question 2 above, needed for this remedial action?..... ☐ Yes ☒ No
- If "Yes," specify the section/page(s) in the RAW where any federal, state, or local permits, permit modifications, or certifications are discussed:
- _____

Soils

4. Is a soil remedial action required?..... ☒ Yes ☐ No
- If "No," skip to **Ground Water**
5. Check each type of remediation being proposed for soils:
- | | |
|---|---|
| <input type="checkbox"/> Excavation | <input type="checkbox"/> Soil Washing |
| <input checked="" type="checkbox"/> Capping/other Engineering Control | <input type="checkbox"/> Bioremediation |
| <input checked="" type="checkbox"/> Institutional Control | <input type="checkbox"/> Soil Vapor Extraction |
| <input type="checkbox"/> Chemical Oxidation | <input type="checkbox"/> Chemical Reduction |
| <input type="checkbox"/> Thermal desorption | <input type="checkbox"/> Other (specify): _____ |
6. Does the proposed remedial action address all saturated zone source material?..... ☒ Yes ☐ No ☐ N/A
7. Is an engineering control proposed in this submission?..... ☒ Yes ☐ No
- If "Yes," indicate the receptor(s) each engineering control is intended to protect. (check all that apply)
- ☒ Human ☐ Ecological ☐ Offsite Impacts
8. If a restricted use remedy is being proposed, has consent from all involved property owners been obtained? ☒ Yes ☐ No ☐ N/A

Ground Water

9. Is a ground water remedial action required?..... ☒ Yes ☐ No
- If "No," skip to **Non-Aqueous Phase Liquid (NAPL)**
10. Check each type of remediation being proposed for ground water:
- | | |
|---|---|
| <input type="checkbox"/> Containment | <input type="checkbox"/> Hydraulic Control |
| <input type="checkbox"/> Multiple Phase Extraction System | <input checked="" type="checkbox"/> Monitored Natural Attenuation |
| <input type="checkbox"/> SVE/Air Sparging | <input type="checkbox"/> Chemical Oxidation |
| <input type="checkbox"/> Ozone Sparging | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Pump & Treat | |

Non-Aqueous Phase Liquid (NAPL)

11. Does the proposed remediation include a remedial action for LNAPL or DNAPL?..... ☐ Yes ☒ No
- If "Yes," check all that apply:
- | | <u>Containment/Control</u> | <u>Removal</u> | <u>Other</u> |
|-------|----------------------------|--------------------------|--------------------------|
| LNAPL | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| DNAPL | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- If you checked "Other," specify the type of remediation proposed:
- _____

Environmentally Sensitive Natural Resource (ESNR)

12. Is a remedial action required for an ESNR?..... ☐ Yes ☒ No
- If "No," skip to **Indoor Air**
13. Check each type of remediation being proposed for ESNR(s):
- ☐ Capping ☐ Excavation/Dredging ☐ Other (specify): _____

Indoor Air

14. Was a soil gas investigation required? ☐ Yes ☒ No
15. Are soil gas concentrations currently greater than 10 times SGSLs? Not Applicable ☐ Yes ☐ No
16. Is a vapor intrusion engineering control/mitigation system required? Not Applicable ☐ Yes ☐ No

If "Yes," Check each type of mitigation being proposed for indoor air:

- | | |
|---|---|
| <input type="checkbox"/> Subsurface Depressurization System | |
| <input type="checkbox"/> HVAC Positive Pressure | <input type="checkbox"/> Subsurface Ventilation Systems |
| <input type="checkbox"/> Soil Vapor Extraction System | <input type="checkbox"/> Other (specify): _____ |